

DEMOGRAPHIC FACTORS INFLUENCING CONTRACEPTIVE USE

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ABSTRACT

The descriptive study was conducted to examine the influence of demographic factors on contraceptive use. The purposive sampling technique was used to select the adult female residing in Mangalore. Demographic proforma was used to collect the data. The data obtained were analyzed using chi-square statistics. The results indicated that received information about contraceptive, religion, no of children desired and income significantly associated with contraceptive use. The results further indicated that the age of the women, type of family, education, occupation, history of abortion, history of loss of child, husband age and age at marriage were not associated with contraceptive use. The study concludes that the contraceptive use is influenced by contraceptive information, religion, number of children desired and income.

BACKGROUND

Many authors raised the alarm that a stage would reach in the world when food supply would not match its population growth (Braddocks,1977). While most of the developed countries have managed to overcome this, the issue of population growth and consequent food shortage in developing countries is overwhelming (Nwachukwu, Obasi, 2008). This expansive population growth rate has been attributed to some

factors, the major of which is low contraceptive usage. Lack of contraceptive use is a major contributor to the unintended pregnancies and birth observed worldwide. Although contraception is the most effective method to overcome this problem, the problem still exists and has not been solved in many countries, especially developing countries. Therefore, this survey was carried out to assess, how certain demographic factors influence the contraceptive use among adult female in urban areas of Dakshina Kannada District.

OBJECTIVE

To examine the influence of demographic factors on contraceptive use among the adult female.

MATERIALS AND METHODS

Descriptive survey design was used in this study. Purposive sampling technique was used to obtain the data from a total of 150 adult female aged 20 to 45 years residing in selected areas (i.e., Chillimbiguddae, Boloor, Bokappatna, Lady hill, Bejai, Kapikad, and Sulthanpatheri) of Mangalore city, Dakshina Kannada district. The study included only the adult female those married and living with their husband. After obtaining administrative permission, home visit was done in selected areas. The eligible women's were explained about the purpose of the study. Once the

eligible women agreed to participate in the study, confidentiality was assured and informed consent was obtained. The demographic proforma was applied to get the information.

DESCRIPTION OF THE TOOL

Based on the review of literature and experts suggestion the demographic proforma was developed. This tool was designed with 13 item like age of the women, husband's age, educational status of the women, occupation, income, religion, type of family, history of abortion, history of loss of child, age at marriage, information about contraceptive, number of children desired and contraceptive use. Contraceptive use was measured as dichotomous variable. If the women used contraceptive they were asked to write the duration of use. The women those who used contraceptive for more than six month were considered as contraceptive user.

RESULTS

Majority of the adult female (46.6%) belonged to 28 – 36 years of age group, 42% had secondary education, 58% were housewife, 81.3% were belonging to Hindu religion, 66% of the adult female married between 15-25 years of their age, 71.3% of them desired to have only two children. Most of the adult females (72.7%) were belonging to nuclear family, 21.3% of them had history of abortion, 2% had history of loss of child, most of them (82.66%) had income less than 10,000 and only 34.6% of them had information about contraceptives.

Table 1: Association between contraceptive use and selected variables such as age of the women, husband's age, educational status of the women, occupation, income, religion, type of family, history of abortion, history of loss of child, age at marriage, information about contraceptive and number of children desired.

Variables	Contraceptive used	Contraceptive not used	df	χ^2	p-value
Religion					
Hindu	22	100			
Christian	10	16	2	5.879	.053
Muslim	0	2			
Income					
1000 - 10000	19	95			
10000 - 20000	9	19	2	7.346	.025
> 20000	4	4			

No of children desired					
One	3	28			
Two	29	78	2	7.886	.019
Three and more	0	12			
Received information about contraceptive					
No information	12	86	1	13.914	.000
Had information	20	32			

The table 2 shows that contraceptive information, religion, no of children desired and income significantly associated with contraceptive use but no significant association found between age of the women, type of family, education, occupation, history of abortion, history of loss of child, husband age and age at marriage with contraceptive use.

DISCUSSION

This present study examined the influence of demographic factors on contraceptive use. Religion has significant association with contraceptive use. This corroborates the work done in Kenya which reports that religion has influence on contraceptive choice (Kim, Kols and Mudieke, 1998). The present study result indicates that desired number of children was one of the most important factors relating to the contraceptive use. This findings supported by the study done in Bangladesh which shows that desire for more children influenced the contraceptive use (Ullah, Nitai Chakraborty, 1993). Family income has a significant effect on contraceptive use, as Ojaka argues lower

the economic status of the household, the higher the non-users (Ojaka, David, 2008).

The present study shows that there is no significant relation between women's age and education. This is contradicted by the study done in Bangladesh which shows positive relation between women's age, education with contraceptive use (Ullah, Nitai Chakraborty, 1993). This present study reveals that contraceptive use is not influenced by type of family. This is contradicted by the study done in Nigeria which reveals that family setting is the most significant demographic determinants of contraceptive use (Olugbenga Bello, Abodunrin and Adeomi, 2011). In Vanuatu, T.K. Jayaraman found that the women's work status is the important factor affects the contraceptive use (Jayaraman, 1995). This is contradictory to the present study finding. The present study shows that husband age is not having any influence on contraceptive use. This is contradicted by the study done by Arbab A.A. He says that women's current use of contraceptive significantly associated with

husband's age (Arbab, Bener and Abdulmalik, 2011).

CONCLUSION

The present study concludes that contraceptive use is influenced by religion, number of children desired, income and information on contraceptive use.

REFERENCES

1. Agyei, W.K and Migadde M. (1995). Demographic and socio cultural factors influencing contraceptive use in Uganda.27(1):47-60.
2. Braddocks, J. (1977). Reading in Social Problem. Dushkin Pub. Group Inc. pp193 – 199.
3. Jones, M. (2004). The Capacity of Africa's Agricultural Sector to contribute to achieving the United Nations Millennium Development Goals. Annual Report Special Paper. CTA Netherlands.
4. Hasna, F. (2002) "Strategies to Widen Access to Family Planning in the Arab World: A Case Study of Zarqa, Jordan" PhD thesis (unpublished), London School of Hygiene and Tropical Medicine, University of London.
5. Huxley, I. (1951). Introduction. In Cook R.C. Human fertility. William Sloane Associates. New York.
6. Malthus, T.R. (1798). An Essay on the Principle of Population. 2 Vols. E P Dutton and Co. Inc. New York.
7. Moor, J. (1976). A search for order in complexity. Zondervan Pub. House pp 518 –519.
8. Nwachukwu, I. and Obasi O.O. (2008). Use of Modern Birth Control Methods Among Rural Communities in Imo State, Nigeria. African Journal of Reproductive Health. 12(1): 101-108
9. Ojaka, David.(2008). Trends and determinants of unmet need for family planning in Kenya. The DHS Working Papers, Demographic and Health Research, Macro International Inc.

Benefit of Being Polite

The path to a successful life comes through the stairs of politeness. An act of politeness can do wonders that no monetary thing can do. A photographer once clicked a photograph of ex-president of India, Dr. Kalam with a shawl placed on his shoulder. After the photo shoot was over, the photographer rudely took off the shawl and walked off. The President smiled. After being asked about his composed behavior, he politely answered that maybe the photographer needed the shawl more than he did, and continued his work.

People in big positions come and go but it is only their humble nature that draws millions of people towards them. Their polite words filled to the brim with modesty and love melt the hearts of even the rudest amongst the crowd. By talking politely to all we can make an impact on others lives.

Politeness is a powerful tool to conquer the world...

A.S.Khan